

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | Jb | | 05-04-0 |
| O.I.P.E. CLASSIFIER | DR | 32 | 5/31/01 |
| FORMALITY REVIEW | TM | 1C864 | 6/20/01 |
| RESPONSE FORMALITY REVIEW | JP | 1027 | 10/26/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final | Original |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

66/30/01
10/26/01
10/26/01